

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
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31	1					
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39	1					
40		1				
41		1				
42		1				
43		1				
44	1					
45		1				
46		1				
47	1					
48		1				
49		1				
50	1					
TOTAL IND.	10					
TOTAL DEP.	40					
TOTAL CLAIMS	50					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		1				
52		1				
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97						
98						
99						
100						
TOTAL IND.	0					
TOTAL DEP.	2					
TOTAL CLAIMS	2					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

BEST AVAILABLE COPY